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** CONTINUING DATA *****
 (None) SCB

** FOREIGN APPLICATIONS *****
 (None) SCB

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature <i>Sarah C. Buntan</i> Initials SCB	STATE OR COUNTRY MI	SHEETS DRAWING 3	TOTAL CLAIMS 29	INDEPENDENT CLAIMS 3
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ADDRESS

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TITLE

Head restraint mechanism and method for making same

FILING FEE RECEIVED 1042	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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